

Appendix 7

Children National Medical Center: Planned Nursing Program

Below is language adapted from a document CNMC intends to utilize in planning the provision of effective and efficient school nursing services after current contractual agreements with DOH end in 2006. Please, note that the global document from which the language has been extracted requires further development.

A Comprehensive Nursing Program

The Children's nursing program focuses primarily on prevention and early identification and intervention to address student health problems. We embrace the concept that in order to effectively address student health and improve their ability to learn, a school nursing program must consist of many components. Each component contributes in unique ways yet overlap with other components. Therefore, nurses work collaboratively within the school setting to provide coordinated services for students.

Vision

The Children's School Services Comprehensive School Health Program will be a nationally recognized model that leverages expertise and resources from various stakeholders in the public and private sector, including healthcare providers, government officials, educators, families, and youth advocates. Specifically,

- The program will empower students and families through prevention, early detection, and intervention and health education.
- It will establish a foundation that will encourage the promotion and maintenance of a lifetime of optimal health and well-being.

Mission

The mission of the Children's School Services Comprehensive School Health Program is to enhance education by maximizing the health and well being of youth in the District's public schools. Recognizing the diversity of the student population, the nurse works with school personnel, families and community resources to minimize and eliminate health-related barriers to learning.

Goals

To support the vision and mission, the following key strategic areas of focus form the foundation and guiding concepts of the Children's comprehensive nursing program.

These strategic initiatives were used in the design and development of each component and supportive structure of the Children's Comprehensive School Health Program:

Focus Area #1 - An Improved Model for Nursing

Goal: To develop and implement a nursing care model that will ensure comprehensive school nursing services reflective of the diverse population served in individual schools.

Focus Area #2 - Enhanced Quality and Access to Care

Goal: To ensure that Quality nursing services are available when and where students need them.

Focus Area #3 - Efficient Management of Resources

Goal: To efficiently manage available nursing resources and explore opportunities for additional resources to support major initiatives and/or emerging issues.

Focus Area #4 - Effective Communication and Linkages

Goal: To establish a unified voice for the nursing program that effectively represents it to the external organization.

Focus Area #5 - Effective Legislature/Compliance Standards

Goal: To ensure that the school services nursing program operates within established legal parameters, and where necessary assist in enhancing the regulations to support program goals.

Scope of Services

The Children's Comprehensive School Health Program consists of eight components, consistent with the Center for Disease Control and Prevention (CDC) endorsed eight-component coordinated school health model. These eight components are addressed from the perspective and based on the scope of professional school nursing practice, which represents the major portion of the Children's Comprehensive School Health Program.

I. School Health Services

In the District of Columbia Public and Public Charter Schools, school nurses will assess, plan and implement school health services, which include but are not limited to:

- A. Nursing assessments of students with health related problems for the purpose of providing appropriate and effective care and services inclusive of the following aspects of care:
1. Early identification of health conditions and health care needs
 2. Referral for care to health care providers and community-based programs based on identified health care needs.
- B. Determine priorities for screening programs, conduct screenings, make referrals and provide follow-up related to:
1. Vision screening:
 - Elementary School - on Pre-K, K, 1st, 2nd and 6th graders, and un-graded students in all schools
 - Secondary schools – grades 8, 10 and un-graded classes
 2. Muscle balance screening for kindergarten students
 3. Color blindness screening for all 1st grade students
 4. Scoliosis screening:
 - Elementary School – grade 6 with education awareness component for all students
 - Secondary Schools – grade 8
 5. Hearing screenings on Pre-K, 1st, 2nd, 4th, 6th and un-graded students
 6. Participate in dental health screening, referral and education programs in selected grades and review/analyze results of dental certificates
 7. Immunization review, interpretation and surveillance, with follow-up as necessary
 8. Health appraisal review including measurements of height, weight, and blood pressure on 2nd, 4th and 6th grade students, special education students and all A-3's (transfers and new students) in all grades except Pre-K, K, 1st, 3rd and 5th grades.
- C. Administration and/or monitoring of appropriately authorized medications.
- D. Implement disease management programs to case manage children with chronic diseases, i.e., Asthma, Diabetes, and Epilepsy.
- E. Implement the AIDS Prevention Program condom-availability program per established protocol.
- F. Maintain health records with cooperation of DCPS personnel in all schools in accordance with D.C. Law 6-66.
- G. Establish systems to provide care for illness and injury
- H. Monitor communicable disease prevention and control program
- I. Serve as clearinghouse for abuse and neglect reporting and education

- J. For special education schools, provide case management for children with special health care needs in citywide Special Education programs located in the public and charter schools, consisting of:
 - 1. Assessment of students health status by reviewing records, obtaining health and developmental histories, diagnoses, prognoses, medication history and physical examination and assessments
 - 2. Assisting parents and staff in students health and classroom management
 - 3. Assisting families by interpreting health problems and care coordination
 - 4. Developing individualized nursing care plans
 - 5. Health records management

In addition, school nurses in the District of Columbia Public and Public Charter Schools will provide the services listed under each of the following areas.

II. Health Education

- A. Deliver classroom age-appropriate instruction that addresses physical, mental, emotional, and social dimensions of health, develops health knowledge, attitudes and skills.
- B. Instructions will be planned to motivate and assist students to maintain and improve their health, prevent disease, and reduce health-related risk behaviors.
 - 1. Establish resource files on health topics
 - 2. Promote special health promotion observances
 - 3. Participate on health curriculum committees to provide input regarding current health risks, types of health concerns of students, etc.
 - 4. Support and reinforce health instruction goals and objectives
 - 5. Act as a resource to classroom teachers as a presenter on health-related subject matter.
- C. Core educational topics will include:
 - 1. Sexual Assault Prevention Program in all elementary schools in collaboration with DCPS staff, D.C. Metropolitan Police Department, and Department of Health.
 - 2. Prevention of Smoking in coordination with local chapter of American Academy of Pediatrics, Children's National Medical Center pediatric residents and other health care providers and/or community-based organizations.
 - 3. Serve as resource personnel for health education, on STD/HIV Prevention, Substance Abuse, Nutrition, and Human Sexuality.
 - 4. Collaboration with Addiction Prevention and Recovery Administration (APRA) staff to implement substance abuse prevention education within the schools.
- D. Provide in-service education for school personnel on surveillance of health problems, communicable disease control, infection control, abuse and neglect reporting, as well as other topics, as appropriate.

III. Healthy School Environment

- A. Monitor the school environment to identify hazards and work to correct the problem(s).
- B. Establish and monitor an injury reporting system and ensure action is taken to eliminate the risk of injury in the school setting.
- C. Monitor the emotional needs of students and staff.
- D. Contribute to the design, development, implementation and evaluation of crisis intervention plans.
- E. Design, implement and evaluate strategies to address emergency concerns related to students with special needs.

IV. Physical Education

- A. Contribute information for designing adaptive physical education programs for students with special health care needs
- B. Provide information regarding physical activity for students with special health care needs.
- C. Collaborate with physical educators to meet physical education program goals.

V. School Nutrition Services

- A. Encourage school breakfast programs.
- B. Monitor school food services menus for adherence to dietary guidelines.
- C. Encourage presence of nutritious foods in vending machines.
- D. Assist in education programs for school food services staff.
- E. Assist in monitoring food preparation areas in regards to sanitation.

VI. School Counseling, Psychological and Social Services

- A. Collaborate with counseling staff to identify students with actual or potential emotional health risks.
- B. Participate on interdisciplinary teams to provide input regarding students with health-related problems and take leadership for interventions.
- C. Monitor absenteeism for possible health factors.

VII. School-site Health Promotion for Staff

- A. Maintain health records of employees and identify potential emergency situations.
- B. Provide health education/health promotion activities based on health risk appraisal information.
- C. Provide monitoring of chronic disease conditions at the request of staff.

VIII. Family and Community Involvement

- A. Take leadership in developing/mobilizing community-based school health advisory groups.
- B. Network with community agencies to identify physical and mental health needs of children and families and collaborate to develop programs to meet the needs.
- C. Participate in community-based advisory groups that address the problems of children and youth.

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